

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Wholesale & Specialty Insurance Association (WSIA) PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Owens, Robert, , ,

Mailing Address 11575 Great Oaks Way
Ste 200

City
Alpharetta

State
GA

Zip Code
30022-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Westchester

Occupation (for Individual)
EVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2020

Transaction ID : VNW2GHKZPQ2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rubel, Gregory, J., ,

Mailing Address 1713 Singletree Ct

City

McKinney

State

TX

Zip Code

75072-8731

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
One General Agency

Occupation (for Individual)
Director of Corporate Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2020

Transaction ID : VNW2GHMAX86

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ryan, Patrick, , ,

Mailing Address 1001 Green Bay Rd
PMB 309

City

Winnetka

State

IL

Zip Code

60093-1721

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RT Specialty

Occupation (for Individual)
Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2020

Transaction ID : VNW2GHN6D01

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5500.00